## L23000231322

(Requestor's Name)				
(Addre	ess)			
(Address)				
(Cin/s	State/Zip/Phon	no #1\		
(City/S	state/Zip/Filo/	ic #)		
PICK-UP	MAIT	MAIL		
(Busin	ess Entity Na	me)		
·	•	•		
(Dog.)	ment Number	<u> </u>		
(5000)	ment Namber	)		
		•		
Certified Copies	Certificate	s of Status		
Special Instructions to Fili	ng Officer:			
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Office Use Only



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06/21/24--01029--018 \*\*60.00





## **COVER LETTER**

Registration Section

Division of Corporations					
	BGNV INV	ESTMENTS LLC			
SUBJECT:	Name of Limited Liability Company				
		Amendment and fee(s) are sub			
		BRANDON H GARCIA			
	Name of Person				
		9380 SW 54 STREET			
	Firm/Company				
	BGNV INVESTMENTS LLC				
Address					
		9380 SW 54 STREET MI	AMI FLORIDA 33165		
			City/State and Zip Code		
		bgnvinvestmentsllc@gmail.	.com (to be used for future annual report notification)		
<b>5</b> 6 4 7	<i>a</i>				
For further in	ntormation co	encerning this matter, please c	all:		
brandon			305 721 0655 at ()		
	Name of	Person	Area Code Daytime Telephone Number		
Enclosed is a	a check for the	e following amount:			
□ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &	
Re Div P.C	iling Address gistration S vision of Co D. Box 6327 Ilahassee, F	ection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	SECUTIVE OF ST TALLYING SEE.	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BGNV INVESTMENTS LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number F23000231322	were filed on 05/10/2023 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	vility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	NICOLE M VAZQUEZ	
Principal office address MUST BE A STREET ADDRESS)	9380 SW 54 STREET	
	MIAMI FLORIDA 33165	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regist	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	NICOLE M VAZQUEZ	9380 SW 54 STREET MIAMI FLORIDA 33165	= Add
			□Remove
			□Change
			□Add
			Петюче
			Change
<del></del>			□Add
			🗆 Remove
			□Change
	<del></del>		□Add
			Remove
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Filing Fee: \$25.00